# BADGERCARE+ Standard and Benchmark Plans HMO Choices and Changes for Southeastern Wisconsin

The following explains how BadgerCare Plus Standard and Benchmark Plan members can choose and change HMOs in six Southeastern Wisconsin counties (Milwaukee, Waukesha, Kenosha, Ozaukee, Racine, and Washington Counties) as a result of the State's new HMO contracts in that region.

# How do BadgerCare Plus Standard and Benchmark Plan members in these six counties choose an HMO?

- Go online to access.wi.gov
- Call to use our self-service phone option at 1-800-291-2002
- Mail the completed HMO Enrollment Choice form

#### Dates for choosing an HMO:

July 19, 2010 — Northern Milwaukee County August 18, 2010 — Southern Milwaukee County September 17, 2010 — Waukesha, Kenosha, Ozaukee, Racine, and Washington counties

The HMO Enrollment Specialists can help members choose an HMO, members may call 1-800-291-2002; Monday - Friday 7:00 a.m. to 6:00 p.m.

<u>ACCESS.wi.gov</u> and the self-service phone system are available 24 hours a day — 7 days a week.

#### How do BadgerCare Plus members change HMOs?

During the first 90 days of the member's HMO enrollment effective date, members can change their HMO for any reason using one of four choice methods: online, self-service phone system, mail-in form, or calling the HMO Enrollment Specialist.

If a member does not request a change within 90 days after the enrollment effective date, s/he must stay enrolled in his/her HMO for the next nine (9) months. There are limited exceptions to this policy for continuity of care. Members should contact the HMO Enrollment Specialist if they have questions about exemptions.

## If a member changes HMOs, when will the change be effective?

The effective date of a change depends on the date the request is made. If the request to change an HMO is made in the first two weeks of a month, enrollment in the new HMO would begin the following month. If the request to change an HMO is made in the last two weeks of the month, enrollment in the new HMO would not begin until the second month from the month the change was requested.

For example: If an HMO change request is made on September 12th, enrollment in the new HMO would be effective October 1. If an HMO change is made on September 18th, enrollment would be effective November 1.

## What if a member is auto-assigned to an HMO s/he does not want?

The member has 90 days after the HMO enrollment effective date to change HMOs. The member may request a change by contacting the HMO Enrollment Specialist or online at <a href="access.wi.gov">access.wi.gov</a>. The HMO Enrollment Specialist can help the member choose an HMO based on the member's preferred physician and hospital and the HMO's quality score.

